

STATE HEALTH COUNCIL

February 14, 2012

A meeting of the State Health Council was called to order by Chairman Marlene Kouba at 10:00 a.m. on Tuesday, February 14, 2012 in AV Room 212 of the Judicial Wing, State Capitol, Bismarck, ND.

Members present:

Marlene Kouba, Regent, Chairman
Gordon Myerchin, Grand Forks, Vice Chairman
Carmen Toman, Bismarck, Secretary
Greg Allen, Jamestown
Howard Anderson, Turtle Lake
Mike Jones, Bismarck, *by teleconference*
Lee Larson, Leeds
Wade Peterson, Mandan
Dennis Wolf, MD, Dickinson, *by teleconference*

Members absent:

Hjalmer Carlson, Minot
Jerry Jurena, Bismarck

Staff members present:

Terry L. Dwelle, State Health Officer
Arvy Smith, Deputy State Health Officer
John Baird, Special Populations Section
Darleen Bartz, Health Resources Section
Gary Garland, Office of Community Assistance
Dave Glatt, Environmental Health Section
Kirby Kruger, Medical Services Section
Kim Mertz, Community Health Section
Karol Riedman, Internal Auditor
Londa Rodahl, Recording Secretary
Tim Wiedrich, Emergency Preparedness & Response Section

Others present:

See ATTACHMENT A

Minutes

MS. TOMAN MOVED APPROVAL OF THE NOVEMBER 15, 2011 MINUTES. SECOND BY MR. ALLEN AND CARRIED.

Fraud Risk Assessment Reports

Karol Riedman presented the following fraud risk assessment reports for approval: Administrative Support Section, Community Health Section, Health Resources Section, Environmental Health Section, and the Office of the State Health Officer.

MR. ALLEN MOVED THE APPROVAL OF THE FRAUD RISK ASSESSMENT REPORTS FOR THE ADMINISTRATIVE SUPPORT SECTION, COMMUNITY HEALTH SECTION, HEALTH RESOURCES SECTION AND ENVIRONMENTAL HEALTH SECTION, AS WELL AS THE OFFICE OF THE STATE HEALTH OFFICER. SECOND BY MR. PETERSON AND CARRIED.

Carmen Toman, chairman of the Health Council Audit Committee, reviewed the past year's activities of the committee and its 2012 goals and objectives. She also reported that Gordon Myerchin resigned from this committee. Chairman Kouba appointed Mike Jones to fill the vacancy.

Long Term Care Beds Study

Darleen Bartz presented ATTACHMENT B, which gives background information that the Health Council subcommittee will use to prepare the health care bed recommendations report for the Legislative Management Committee. The findings report is due by July 1, 2012.

Veterinarian Loan Repayment Applications

Gary Garland introduced Dr. Beth Carlson, Deputy State Veterinarian, who reviewed the veterinarian loan repayment applications and shared the recommendations from the State Board of Animal Health. Since three veterinarians can receive the awards each year and only three applications were received, the Board recommended that Dr. Henderson in New Salem, Dr. Galbreath in Oakes, and Dr. Klein in Cooperstown receive the awards.

MR. MYERCHIN MOVED THE APPROVAL OF THE VETERINARIAN LOAN REPAYMENT APPLICATIONS FOR DR. LESLIE MARIE HENDERSON, DR. COLLIN WARD GALBREATH AND DR. KRISTEN KLEIN. SECOND BY MS. TOMAN.

The Chair requested a ROLL CALL vote and the motion CARRIED. Allen, Anderson, Jones, Kouba, Larson, Myerchin, Peterson, Toman, and Wolf voted 'aye'. There were no 'nay' votes. Carlson and Jurena—absent.

Dr. Carlson distributed a letter received in December from a veterinarian who received loan repayment funds for one year and now wishes to leave that practice and reportedly move to a nearby community and still remain in the program. This question arose in the past; however, the person didn't pursue it. The working group that established the application requirements (ND Veterinary Medical Association, ND Stockmen's Association, University System, and Board of Animal Health) met to discuss this letter.

The group consensus was they weren't comfortable with someone applying for a certain practice, staying awhile, and then—whether their intent was to do it or not—moving on to a different practice, or even staying in that area, but then opening up their own practice and competing with an existing business, and taking the loan repayment funds with them. That wouldn't sit well with the veterinary community because it sort of creates an unfair advantage. The group felt if a person leaves that position they can certainly apply to get into the program for the duration of the four-year maximum period but that the group wouldn't want to support them competing against another veterinarian.

The law states that one of the criteria for the loan repayment program is to identify communities in need of a veterinarian—to establish a priority ranking—and then the contract is specific to the applicant and the community and that they will actively start practice in that community.

What this letter seems to indicate is that the veterinarian still plans to serve somewhat in the same practice area but is going to move to a different city.

The group's main concern is about the precedence it might set—maybe it would motivate people to take a job in an area where they had no intention of staying and then move and try to take the funds with them.

MR. ANDERSON MOVED THAT WE TABLE THE DECISION UNTIL THE NEXT MEETING AND HAVE THE DOCTOR ATTEND THE NEXT MEETING AND BRING LETTERS OF RECOMMENDATIONS FROM THE COMMUNITY. SECOND BY MR. PETERSON.

The Chair requested a ROLL CALL vote and the motion FAILED. Anderson, Jones and Kouba voted 'aye'. Allen, Larson, Myerchin, Peterson, Toman, and Wolf voted 'nay'. Carlson and Jurena—absent.

MR. MYERCHIN MOVED TO TABLE A DECISION UNTIL THE NEXT MEETING TO HAVE AN OPPORTUNITY TO LOOK AT THE DOCTOR'S CONTRACT AND APPLICATION, AND FIND OUT IF THE COMMUNITY IS SUPPORTIVE OF HIS PRACTICE. SECOND BY MR. ALLEN.

A voice vote was taken and the motion CARRIED.

Mr. Peterson asked the Department to consult with our assistant attorney general on whether this would be considered default.

Mr. Garland presented the physician loan repayment applications for Dr. Alice Mann, practicing in Linton, and Dr. Misty Anderson, practicing in Valley City. The city/state match is usually \$45,000 each; however, Linton will be providing \$30,000 a year for two years to Dr. Mann.

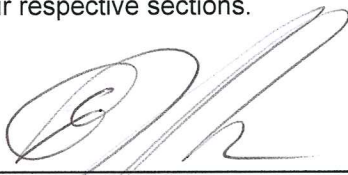
MR. ALLEN MOVED APPROVAL OF THE LOAN REPAYMENT APPLICATIONS FOR DR. ALICE MANN AND DR. MISTY ANDERSON. SECOND BY MS. TOMAN.

The Chair requested a ROLL CALL vote and the motion CARRIED. Allen, Anderson, Jones, Kouba, Larson, Myerchin, Peterson, and Toman voted 'aye'. There were no 'nay' votes. Carlson, Jurena and Wolf—absent.

Department Section Updates

The section chiefs presented overviews/updates of their respective sections.

The meeting adjourned at 3:15 p.m.



Carmen Toman, Secretary

Long Term Care Beds Study

Update from the
Health Council Subcommittee

February 14, 2012

HB 1040

- SECTION 3. HEALTH CARE BED RECOMMENDATIONS – REPORT TO LEGISLATIVE MANAGEMENT.

During the 2011-2012 interim, the state health council shall review current health care bed recommendations and determine if changes should be made to better serve the population of North Dakota. The state health council shall report findings to the legislative management by July 1, 2012.

Health Council Subcommittee

Members:

- Wade Peterson,
- Howard Anderson,
- Dr. Dennis Wolf, and
- Jerry Jurena.

Current Recommendations

January 18, 1994 recommendations adopted by the Health Council:

- Nursing Facility Beds:

No additional nursing facility beds will be approved for licensure or certification unless capacity within the affected planning region falls below sixty nursing facility beds per 1000 aged 65 and above.

- Basic Care Facility Beds:

In no case will the statewide bed capacity exceed 15 beds per 1000 population aged 65 and older.

June 1996 – Report of the Task Force on Long-Term Care Planning

- North Dakota's inventory of nursing facility capacity significantly exceeds the national norm which is currently about 50 nursing facility beds per thousand populations over the age of 65. North Dakota's authorized capacity is 75.6 per thousand based on 1995 census projections.
- The State Health Council adopted a recommended target of 60 nursing facility beds per thousand population over age 65 for all planning regions. The Task Force endorses this target capacity.
- Long-Range Recommendation: The Task Force recommends that economic incentives be established to encourage reduction of nursing facility bed capacity to 60 beds per thousand population over age 65 for all planning regions by the year 2002.

June 1998 – Report of the Task Force on Long Term Care Planning

- Moratorium on Nursing Facility and Basic Care Facility Beds passed in the 1997 Legislative Session.
- The national average was about 50 nursing facility beds per thousand individuals over the age of 65.
- The stated goal of the task force was to reduce the beds per thousand from about 75 per thousand to 60 per thousand by 2002.

September 2000 – Report of the Task Force on Long Term Care Planning

Recommendations:

- Retain Basic Care as currently defined and regulated.
- Require the Department of Human Services to register Assisted Living Facilities.
- Assisted Living Facilities should be required to meet appropriate licensure requirements under Department of Health Food and Lodging.

2007 National LTC Bed Ratios

| National/ State | 2007 65+ | Residential Care Beds/1000 | Nursing Facility Beds/1000 | Percent HCBS |
|--------------------|------------|----------------------------------|----------------------------------|-----------------|
| National | 37,887,958 | 37.2 | 44.1 | 31.0 |
| Colorado | 492,685 | 28.9 | 40.1 | 34.9 |
| Montana | 133,578 | 32.6 | 53.3 | 29.3 |
| N. Dakota | 93,285 | 37.2 | 68.5 | 6.3 |
| S. Dakota | 113,555 | 31.5 | 57.7 | 11.5 |
| Utah | 233,892 | 22.5 | 33.7 | 10.7 |
| Wyoming | 63,901 | 22.5 | 47.8 | 20.4 |

Mollica, R., Sims-Kastelein, K., & O'Keefe, J. (2007). Residential Care and Assisted Living Compendium: 2007. Retrieved from <http://aspe.hhs.gov/daltcp/reports/2007/07alcom.htm>

North Dakota LTC Bed Ratios

| March 2009 – Beds/1,000 Individuals 65 + | | | | | |
|--|-----------------------|------------|--------------------------|----------------------|---------------------------------------|
| Individuals 65+ * | Nursing Facility Beds | Swing Beds | Basic Care Facility Beds | Total NF and BC Beds | Beds/1,000 65+ |
| 97,771 | 6,261 | 905 | 1,668 | 7,929 | NF: 64.04 BC: 17.06 Both: 81.10 |
| February 2012 – Beds/1000 65+ | | | | | |
| Individuals 65+ ** | Nursing Facility Beds | Swing Beds | Basic Care Facility Beds | Total NF and BC Beds | Beds/1,000 65+ |
| 110,235 | 6,294 | 799 | 1,818 | 8,112 | NF: 57.10 BC: 16.49 Both: 73.59 |

* NDUIS 2005 Census Projections from the 2002 Report
** NDUIS 2010 Census Projections from the 2002 Report

North Dakota LTC Bed Ratios with Swing Beds and Assisted Living Facilities

| February 2012 – Beds/1000 65+ (110,235*) | | | | |
|--|------------|--------------------------|----------------------|---|
| Nursing Facility Beds | Swing Beds | Basic Care Facility Beds | Total NF and BC Beds | Assisted Living Facility Units |
| 6,294 | 799 | 1,818 | 8,112 | 2,597 |
| | | | | NF: 57.10 BC: 16.49 NF+BC: 73.59 ALF: 23.55 NF+BC+ALF= 97.14 SGBD: 7.25 Total (NF+BC+ALF+SGBD)= 104.4 |

**NDUS 2010 Census Projections from the 2002 Report

LTC Occupancy Rates

| Type Facility | Number of Beds/Units | Percent Occupancy |
|---------------------|----------------------|-------------------|
| Nursing Facility* | 5,189* | 92.83%# |
| Basic Care Facility | 1,818 | 82%## |
| Swing Bed | 799 | 20.8%### |
| Assisted Living | 2,597 | Unknown |

* January 2012 NDLTCA Survey of Occupancy – 63 out of 84 facilities reporting
** September 2011 NDUIS Basic Care Bed Occupancy Survey
*** January 2012 NDUIS Swing Bed Occupancy Survey

Considerations

Since the 1994 Recommendations:

- Increase in number of individuals 65+ (Baby Boomers)
- Life expectancy longer
- Decrease in LTC (NF & BC) facility Occupancy
 - Decrease in LTC Length of Stay
 - More in LTC for Rehabilitation or End of Life Care
- LTC Bed Hold and Bed Layaway Programs
- Conversion of NF beds to BC beds
- Growth of Assisted Living Facilities
- More individuals living at home longer
- Increase in the number of individuals receiving HCBS
- Money Follows the Person Program

LTC Beds Workgroup Members

- | | |
|-----------------------------------|---|
| Health Council | North Dakota Long Term |
| Subcommittee Members | Care Association |
| • Howard Anderson | • Shelly Peterson |
| • Jerry Jurena | • Joyce Linnerud Fowler (ALF) |
| • Wade Peterson | • Marilyn Goldade (BC) |
| • Dennis Wolf | • Greg Salwei (SNF) |
| North Dakota Department of Health | North Dakota Department of Human Services |
| • Darleen Bartz | • Maggie Anderson |

Subcommittee Discussion

- Potential Recommendations:
- Decrease in the number of LTC beds/1,000 individuals 65+
 - Increase the age considered to somewhere above 65+/1000 (i.e., 70+)
 - Place a moratorium on the number of Assisted Living Facilities Units

Next Steps

- Subcommittee Meeting to Plan a Meeting with Larger Workgroup
- Larger Workgroup Meeting(s) – Last week in March
- Develop Draft Report of Recommendations for Legislative Management
- Draft Report to Health Council for Review and Approval
- Report of Health Council to Legislative Management by July 1, 2012

Questions?